

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35466

FILED  
Jan 21, 2009  
Secretary of State

**Entity Name:** WALTER JONES CONSTRUCTION COMPANY, INC.

**Current Principal Place of Business:**

608 RUSH ROAD  
YULEE, FL 32097 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1586  
FERNANDINA BCH, FL 32034 US

**New Mailing Address:**

FEI Number: 59-2824232      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POOLE, WESLEY R.  
303 CENTRE STREET  
SUITE 200  
FERNANDINA BEACH, FL 32034 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JONES, WALTER,  
Address: 142 BAYVIEW RD  
City-St-Zip: YULEE, FL

Title: VD ( ) Delete  
Name: TOLLISON, HUGH K. SR, .  
Address: 1235 S 10TH ST.  
City-St-Zip: FERNANDINA BCH., FL

Title: ST ( ) Delete  
Name: JONES, DOROTHY  
Address: 142 BAYVIEW RD.  
City-St-Zip: YULEE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOROTHY JONES

ST

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date